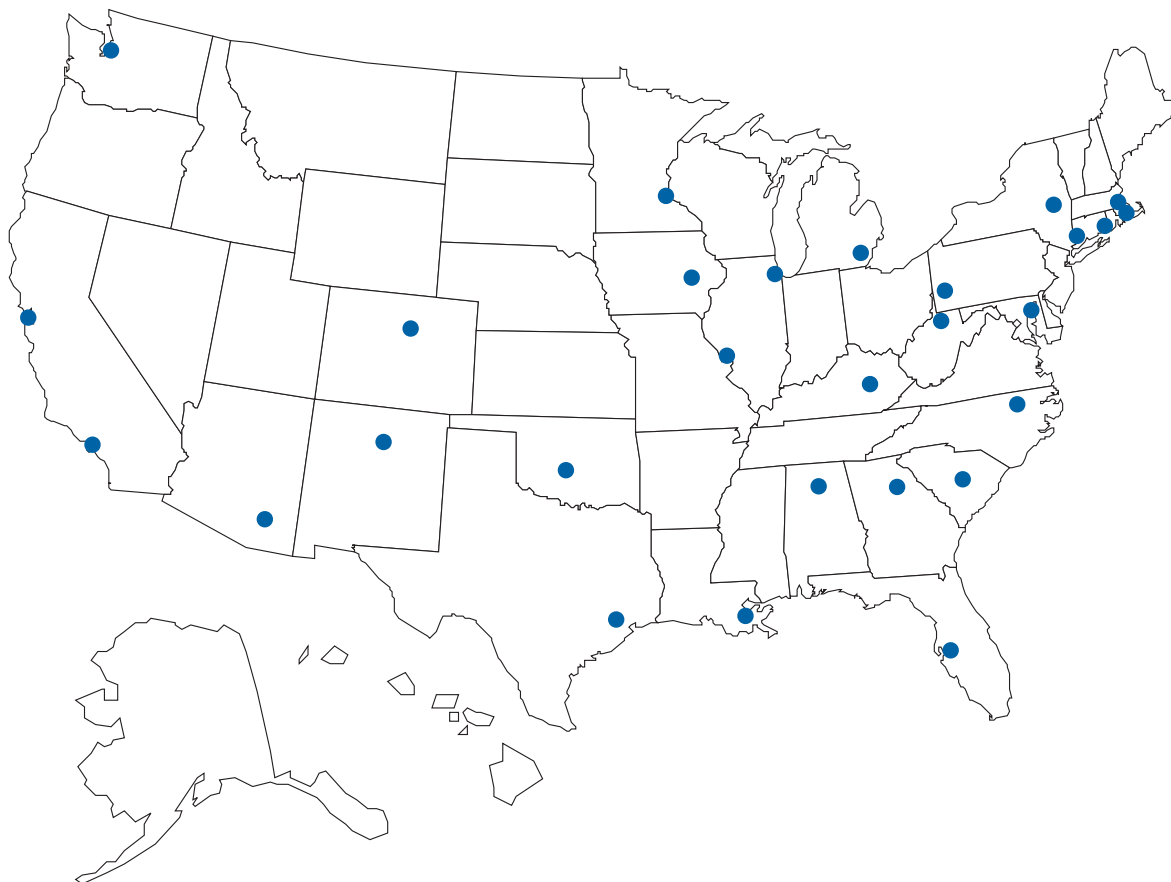




Prevention Research Centers: Linking Science to Practice 2003

CDC's Network of Prevention Research Centers, Fiscal Year 2002



"What better way to make health promotion research relevant than to involve the community in deciding which research should be done? All Americans have a stake in preventing disease and in bringing new ideas home to their neighbors and peers."

Mary Woolley
President, Research!America

Addressing Health Disparities and Other Priority Health Problems

In 1984, Congress authorized the Secretary of the Department of Health and Human Services (HHS) to create a network of academic health centers to conduct applied public health research. The first three centers were funded 2 years later. The Centers for Disease Control and Prevention (CDC) was selected to administer the Prevention Research Centers network and to provide leadership, technical assistance, and oversight.

Individual behaviors and environmental factors cause many chronic diseases—such as cancer, heart disease, arthritis, and diabetes—as well as injuries and some infections. Prevention researchers develop strategies to help people reduce risk factors in their lives and their communities. By involving community members, academic researchers, and public health agencies, the Prevention Research Centers find innovative ways to promote health and prevent disease. Together the partners design, test, and disseminate strategies—often

as new policies or recommended public health practices.

Today 28 centers associated with schools of public health, medicine, or osteopathy are located throughout the country. Each center conducts at least one core research project with an underserved population that has a disproportionately large burden of disease and disability. The centers work with diverse groups in areas as geographically distinct as Harlem, Appalachia, and the Southwest.

In addition to conducting core research, the centers work with partners on special interest projects defined by CDC and other HHS agencies. Expertise gained from this work makes the centers competitive for additional research funding from other sources. Through scientific rigor, community acceptance, and practical application, the centers are finding ways to improve the nation's quality of life.

Prevention Research Centers

University of Washington at Seattle
University of California at Berkeley
University of California at Los Angeles
University of Arizona
University of Colorado
University of New Mexico
University of Oklahoma
University of Texas Health Science Center
at Houston
Tulane University
Saint Louis University
University of Iowa
University of Minnesota
University of Illinois at Chicago
University of Michigan
University of Kentucky
University of Alabama at Birmingham
Morehouse School of Medicine

University of South Florida

University of South Carolina
University of North Carolina at Chapel Hill
West Virginia University
University of Pittsburgh
The Johns Hopkins University
Columbia University
State University of New York at Albany
Yale University
Boston University
Harvard University

Research Focus

Keeping Older People Healthy and Independent Through Community Partnerships
Engaging Families, Neighborhoods, and Communities in Chronic Disease Prevention
Promoting the Health and Well-Being of Adolescents
Promoting the Health of Multi-Ethnic Communities of the Southwest
Promoting Healthy Lifestyles in Rural Communities
Promoting Healthy Lifestyles in American Indian Communities
Promoting Health and Preventing Disease in Native Americans

Growing from Healthy Children to Healthy Adults
Preventing Environmental Diseases
Preventing Chronic Disease in High-Risk Communities
Improving the Health of Rural Iowans Through Nutrition and Exercise
Preventing Teen Pregnancy and Promoting Healthy Youth Development
Controlling Diabetes in Communities
Improving Health in Partnership with Families and Communities
Controlling Cancer in Central Appalachia
Reducing Health Risks Among African Americans and Other Underserved People
Promoting Risk Reduction and Early Detection in African American and
Other Minority Communities: Coalitions for Prevention Research
Using Community-Based Prevention Marketing for Disease Prevention and Health
Promotion
Promoting Health Through Physical Activity
Improving Community Health Through Workplace Health Promotion
Promoting Health and Preventing Disease in Rural Appalachia
Promoting Health and Preventing Disease Among Older Adults
Promoting the Health of Adolescents Through Families and Communities
Putting Health Promotion into Action
Preventing Chronic Disease Through Community Interventions
Creating Innovative Public Health Initiatives
Improving the Well-Being of Public Housing Residents
Promoting Nutrition and Physical Activity Among Children and Youth

Merging Research and Practice

The Prevention Research Centers serve as a national resource for developing effective prevention strategies and applying those strategies at the community level. The following examples demonstrate how these strategies are being used.

Helping Children Become Healthy Adults

The Child and Adolescent Trial for Cardiovascular Health Program (CATCH) exemplifies the prevention centers' long-term commitment to identifying effective programs and making them part of everyday life. First, researchers from four universities designed and tested the CATCH curriculum in 96 elementary schools. The results showed that CATCH improved children's nutrition and increased their physical activity and thus could help prevent the later development of chronic diseases such as heart disease and diabetes. Researchers at the University of Texas Health Science Center then explored how to promote CATCH statewide. Marketing techniques, interpersonal networking, and media communications were used to develop a plan for getting the program into Texas schools. CATCH has reached 1,051 schools in Texas, and over 2,000 school staff have been trained to use it.

Helping Seniors Stay Healthy and Active

The University of Washington Health Promotion Research Center is one of two centers focusing on healthy aging. In 1993, the center collaborated with the Group Health Cooperative of Puget Sound and Senior Services of Seattle/King County to develop a physical activity program for seniors. The program emphasizes activities to increase endurance, strength, balance, and flexibility. The pilot study showed that participants improved significantly in almost every area tested—from physical and social functioning to levels of pain and depression. The health care costs for participants were almost 50% lower than for nonparticipants. Now the program is offered in 33 senior centers and senior residences in the Puget Sound region and has been replicated in five states.

Developing Community Capacity to Sustain Research Benefits

An important measure of the success of community-based research is how well a community can sustain healthy behaviors and activities after researchers are

gone. In May 2002, the Prevention Research Center at the Morehouse School of Medicine received the first annual award from the national organization Community-Campus Partnerships for Health. This award recognized the exemplary bond the academic center has forged with its Community Coalition Board. More than an advisory board, the coalition board (which includes neighborhood residents as well as health-department and housing-authority representatives) establishes policy and research priorities. One community resident serves as liaison between the community and the research center, and others are employed as community health workers for research projects. These colleagues are developing skills to initiate research projects to address needs that they identify themselves. While this academic/community relationship is particularly noteworthy, similar partnerships are achieving results in areas where other prevention centers work—such as rural Alabama, Missouri's Bootheel, and American Indian reservations.

Understanding Research Use

The Prevention Research Centers at the University of New Mexico and the University of North Carolina are exploring how research results make their way into practices that are embraced by community residents. At the University of New Mexico, researchers are examining eight community-based public health projects completed in the past 5 years to determine how research informed each project and which pieces of the research were critical to the projects' ongoing success. The projects are diverse; for example, one looked for ways to prevent the reoccurrence of driving while intoxicated, and another focused on developing policies to reduce exposure to second-hand cigarette smoke. At the University of North Carolina, prevention scientists are tracing how practitioners have put guidelines for managing diabetes into practice. The two prevention centers are also collaborating with CDC on reviewing and summarizing the scientific literature on using research findings. These efforts will help public health professionals and agencies improve the process of putting prevention research findings into practice. They will also make it easier for promising prevention research results to be used with different populations.

Capitalizing on Unique Opportunities for Research and Collaboration

“The arrangement affords an ideal combination of talents—a public health agency’s experience in working with high-risk populations and the research skills of a health sciences center.”

*Bert Malone, Director, Division of Chronic Disease Prevention and Health Promotion
Missouri Department of Health and Senior Services*

Range of Disciplines

Each Prevention Research Center encourages interaction among faculty from different disciplines, who bring an array of expertise to each project. This blending of expertise is essential to solving complex health and psychosocial problems. Departments of education, social work, psychology, nursing, and many others work with the schools of public health and medicine. In addition, CDC’s prevention centers network allows centers to collaborate with each other.

Wealth of Partners

The prevention centers work closely with state and local health departments, managed care alliances and health maintenance organizations, state education agencies, and national and community-based organizations. Through these partnerships, promising research findings are translated into practical, cost-effective prevention programs and applied at the community level.

Knowledge of Community Needs

Long-standing relationships between academic institutions and their communities bring public health researchers close to the people they serve. Because of ties to surrounding communities, researchers can design and introduce prevention strategies tailored to these communities. By understanding community attitudes and beliefs and by making the most of community resources, researchers can simultaneously address multiple health risk factors.

Resource for Training

In collaboration with the Association of Schools of Public Health, the Prevention Research Centers program established a 2-year fellowship for doctoral-

level students of racial or ethnic minority origin. The first four fellows are now gaining hands-on experience with projects directed by the centers and their community partners. This fellowship increases the number of public health professionals qualified to work with racial and ethnic minority groups.

Future Directions

The Prevention Research Centers’ future will be shaped by the results of two main endeavors: evaluation and expanded collaboration. A project is now under way to develop a plan for evaluating the Prevention Research Centers program. The centers and their partners are developing models to describe the centers’ collective attributes, designing templates for documenting the effects of the centers’ work, and establishing criteria for judging how well they have achieved their goals. This evaluation plan will help improve program operations and meet the accountability requirements of the program’s diverse stakeholders.

New initiatives are also increasing collaboration. Five pilot projects have been started through funding provided to the Association of State and Territorial Chronic Disease Program Directors and the Association of State and Territorial Directors of Health Promotion and Public Health Education. These grants enable prevention centers to extend their expertise beyond their immediate communities to other state health agencies in need of technical assistance. For example, in one of these pilot projects, the University of South Florida will help the Alaska Department of Health and Social Services integrate social marketing concepts and methods into health promotion and chronic disease prevention programs.

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